## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

PHNL 000149

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		T	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS			13		The same of		Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			/3 minus 20=		* 0			X\$ 9=		OR	X\$18=	0
INDEPENDENT CLAIMS			2 minus 3 =		* 0			X40=		OR	X80=	6
MU	LTIPLE DEPEND	ENT CLAIM PF	RESENT		. <u>:</u> -	X		+135=		OR	+270=	270
* If the difference in column 1 is less than zero					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	980
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL I	
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total +	_//_	Minus	" <i>a</i>	<u> </u>	=/	╽╽	X\$ 9=		OR	X\$18=	
	Independent * FIRST PRESEN	TATION OF MI	Minus	ENDEN	T CLAIM		+	X40≡		OR	X80=	
<u> </u>	THOTTRESEN	TATION OF IM		-140614	, CL/MIVI		1	+135=		OR	+270=	·
							L.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT B	B	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	<u> 6</u>		=(		X\$ 9=		OR	X\$18=	
	Independent FIRST PRESEN	TATION OF MI	Minus JI TIPLE DEP	ENDFN	T CI AIM		† [	X40=		OR	X80=	
Ш							<b>-</b>	+135=		OR	+270=	
							<b>-</b>	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	-					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
		*	Minus	***		=	<u> </u>	X40=			X80=	<b>!</b>
	FIRST PRESEN	ITATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		J ∤			OR		
+135=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Num						er fou	nd in the apr	própriate bo	x in co	lumn 1.	